Map	Parcel
4	

## ALTERNATIVE SOLID WASTE DISPOSAL FORM Annual Approval

Own	ers Name:	Pl	none #:	
Prop	erty Address:	and the second s		
Addr	ess of Owner (If Different):			
1.	Alternative Method of Collection and Disposal (check one and complete other side)			
	Commercial Hauler (Con	nplete part A)		
Disposed at a Self-Owned Business (Complete Part B)				
2.	No Service Required		effective date.	
	Dwelling is Vacant Uninhabitable	VerificationBui	ilding Inspector	
Signat	ure of Property Owner		Date	

This form must be completed and signed by the property owner as well as the Alternative Hauler.

The Town requires that we have this form on file in order to cancel municipal collection and

billing. Include a copy of the most recent paid invoice from your hauler.

Notes: The recycling bin must be returned to the Department of Public Works as a condition of this agreement.

The Alternative Hauler approval extends for the current fiscal year only. In the case of an uninhabitable vacant dwelling, the approval shall expire upon the issuance of a Certificate of Occupancy by the Building Inspector.

Ongoing field inspections will be made of properties approved for Alternative Hauler status. Any residence found to be using Town services will have said Alternative Hauler status revoked and will be billed for Town services henceforth.

## TO BE COMPLETED BY ALTERNATIVE HAULER

Part A	Commercial Hauler	
	Name of Hauler Address Final Disposal Location Signature of Hauler Date Started	
<u>Part B</u>	Self-Owned Business	
	Name of Business	
Comments:		
Approved as a	certified hauler to the Town of North Reading.	Board of Health
Annroved as a	n Alternative Solid Waste Hauler.	